110 COSIMO DRIVE, WOODVALE. 6026

Phone: 0439034491

 Birthdate:
 11/06/1971
 Sex:
 F
 Medicare
 Number:
 62813253821

 Your Reference:
 00001598
 Lab
 Reference:
 24-22021329-HAE-0

Laboratory: AUSTRALIAN CLINICAL LABS

Addressee: DR SARAH CARTER Referred by: DR SARAH CARTER

Copy to:

DR SARAH CARTER PATIENT COPY:

Name of Test: HAEMATOLOGY GENERAL

Requested: 22/08/2024 Collected: 28/08/2024 Reported: 28/08/2024

SPECIMEN: WHOLE BLOOD

13:09

CLINICAL NOTES: to follow

HAEMATOLOGY

Date: Coll. Time: Lab Number:	28/08/24 08:25 #22021329	28/05/24 16:10 90358258	26/04/24 (#Refers to current only 86189651	
HAEMOGLOBIN RBC HCT MCV MCH MCHC	140 4.31 0.43 99 32.5 329 11.4	132 3.88 0.39 * 100 34.0 342 14.1	145 (115 - 165) g/L 4.44 (3.80 - 5.50)×10 12/L 0.45 (0.35 - 0.47) * 101 (80 - 99) fL 32.7 (27.0 - 34.0)pg 324 (310 - 360) g/L 14.0 (11.0 - 15.0)% 6.7 (4.0 - 11.0) ×10 9/L	
MCC Neutrophils Lymphocytes Monocytes Eosinophils Basophils PLATELETS MPV ESR	5.7 2.6 2.5 0.6 < 0.1 < 0.1 346 9.7	7.5 3.9 2.8 0.7 < 0.1 < 0.1 361 9.6 17	3.1 (2.0 - 8.0) x10 9/L 3.0 (1.0 - 4.0) x10 9/L 0.4 (< 1.1) x10 9/L < 0.1 (< 0.7) x10 9/L < 0.1 (< 0.3) x10 9/L 354 (150 - 450) x10 9/L 9.8 (7.1 - 11.2) fL (< 21) mm/h	

#22021329 : The red cell, white cell and platelet parameters are within normal limits.

TESTS COMPLETED: FBE,

INCOMPLETE TESTS: BFO, AVB, IS, CA, ECU, LFT, PO4, OHD, PTH, SEL,

110 COSIMO DRIVE, WOODVALE. 6026

Phone: 0439034491 Birthdate: 11/06/1971 Sex: F Medicare Number: 62813253821 Your Reference: 00001598 Lab Reference: 24-22021329-OHD-0

Laboratory: AUSTRALIAN CLINICAL LABS

Addressee: DR SARAH CARTER Referred by: DR SARAH CARTER

Copy to:

DR SARAH CARTER PATIENT COPY:

Name of Test: VITAMIN D

Requested: 22/08/2024 Collected: 28/08/2024 Reported: 28/08/2024

14:58

CLINICAL NOTES: to follow

BIOCHEMISTRY

SPECIMEN: SERUM VITAMIN D

25-hydroxy Date Time Lab No. Vitamin D 28/08/24 08:25 22021329 ** 23 31/01/23 13:30 74723403 * 34 (50 - 200) nmol/L 31/01/23 13:30 74723403 34

22021329 Vitamin D remains low. Suggest review vitamin D dose and compliance if on treatment.

Interpretation:

Vitamin D deficiency <50 nmol/L Severe deficiency <20 nmol/L

COMMENT: Vitamin D sufficiency is defined as greater than or equal to 50 nmol/L at the end of winter (level may need to be 10-20 nmol/L higher at the end of summer).

Reference: Position Statement. Vitamin D and Health in Adults in Australia and New Zealand. MJA, 196(11): 686-687, 2012.

TESTS COMPLETED: FBE, IS, OHD, INCOMPLETE TESTS: BFO, AVB, CA, ECU, LFT, PO4, PTH, SEL,

110 COSIMO DRIVE, WOODVALE. 6026

Phone: 0439034491

Birthdate: 11/06/1971 **Sex:** F **Medicare Number:** 62813253821 Your Reference: 00001598 Lab Reference: 24-22021329-ISM-0

Laboratory: AUSTRALIAN CLINICAL LABS
Addressee: DR SARAH CARTER Referred by: DR SARAH CARTER

Copy to:

DR SARAH CARTER PATIENT COPY:

IRON MASTER Name of Test:

Reported: 28/08/2024 Requested: 22/08/2024 Collected: 28/08/2024

14:58

CLINICAL NOTES: to follow

BIOCHEMISTRY

IRON STUDIES SPECIMEN: SERUM

Date:	28/08/24	28/05/24	26/04/24		
Coll. Time:	08:25	16:10	09:40		
Lab Number:	22021329	90358258	86189651		
Iron	16.3	18.3		(10.0 - 30.0)	umol/L
Transferrin	2.81	3.03		(2.10 - 3.80)	g/L
Saturation	23	24		(15 - 45)	9
Ferritin	155	141	171	(30 - 300)	ug/L

22021329 Iron studies are within normal limits.

TESTS COMPLETED: FBE, IS, OHD, INCOMPLETE TESTS: BFO, AVB, CA, ECU, LFT, PO4, PTH, SEL,

110 COSIMO DRIVE, WOODVALE. 6026

Phone: 0439034491

Sex: F Medicare Number: 62813253821 Birthdate: 11/06/1971 Your Reference: 00001598 Lab Reference: 24-22021329-BFM-0

Laboratory: AUSTRALIAN CLINICAL LABS

Addressee: DR SARAH CARTER Referred by: DR SARAH CARTER

Copy to:

DR SARAH CARTER PATIENT COPY:

Name of Test: B12, FOLATE (SERUM/RBC)

Requested: 22/08/2024 Collected: 28/08/2024 Reported: 28/08/2024

15:14

CLINICAL NOTES: to follow

BIOCHEMISTRY

VITAMIN B12 AND FOLATE

28/08/24 28/05/24 26/04/24 Date: Time: 08:25 16:10 09:40 Lab Number: 22021329 90358258 86189651 _____ 240 211 * 173 pmol/L > 146 80 83 (> 30) pmol/L 41.1 28.7 35.2 nmol/L Vitamin B12 Active B12 > 146 41.1 Folate

SPECIMEN: SERUM/BLOOD

22021329 Normal B12 and folate results.

ANGES B12 Serum Folate
Normal > 180 > 10.0
Equivocal 150 - 180 5.0 - 10.0
Deficient < 150 < 5.0 RANGES

TESTS COMPLETED: BFO, AVB, FBE, IS, OHD, INCOMPLETE TESTS: CA, ECU, LFT, PO4, PTH, SEL,

110 COSIMO DRIVE, WOODVALE. 6026

Phone: 0439034491

Birthdate: 11/06/1971 Sex: F Medicare Number: 62813253821 Your Reference: 00001598 Lab Reference: 24-22021329-MBI-0

Laboratory: AUSTRALIAN CLINICAL LABS

Addressee: DR SARAH CARTER Referred by: DR SARAH CARTER

Copy to:

DR SARAH CARTER PATIENT COPY:

MULTIPLE BIOCHEM ANALYSIS Name of Test:

Requested: 22/08/2024 Collected: 28/08/2024 Reported: 28/08/2024

SPECIMEN: SERUM

16:49

CLINICAL NOTES: to follow

GENERAL CHEMISTRY

Date: Coll. Time: Lab Number:	(8/08/24 08:25 22021329		28/05/24 16:10 90358258	2	26/04/24 09:40 86189651		
Sodium Potassium Chloride Bicarbonate Anion Gap Urea Creatinine eGFR Calcium Adj. Ca. Magnesium Phosphate T.Protein Albumin Globulin ALP Bilirubin GGT AST ALT	* * *	137 4.4 105 28 8 6.8 77 76 2.77 2.71 1.11 75 44 31 72 11 30 32 31	* *	136 4.8 103 23 15 9.2 71 84 2.66 2.58 0.84 1.06 77 45 32 83 82 29	*	-	(135 - 145) (3.5 - 5.2) (95 - 110) (22 - 32) (9 - 19) (3.5 - 8.0) (45 - 90) (> 59) mL/min (2.10 - 2.60) (0.70 - 1.10) (0.75 - 1.50) (60 - 80) (35 - 50) (23 - 39) (30 - 110) (3 - 20) (5 - 35) (5 - 35)	mmol/L mmol/L mmol/L
LD				191			(120 - 250)	U/L

22021329 ELECTROLYTES

Elevated calcium. PTH and serum 25 hydroxy vitamin D to follow. LIVER FUNCTION

An elevation of AST with a normal ALT may be of muscle or cellular origin. Consider repeat with CK and LDH if clinically indicated.

TESTS COMPLETED: BFO, AVB, FBE, IS, CA, ECU, LFT, PO4, OHD, INCOMPLETE TESTS: PTH, SEL,

110 COSIMO DRIVE, WOODVALE. 6026

Phone: 0439034491

Sex: F Birthdate: 11/06/1971 Medicare Number: 62813253821 Your Reference: 00001598 Lab Reference: 24-22021329-PTH-0

Laboratory: AUSTRALIAN CLINICAL LABS

Addressee: DR SARAH CARTER Referred by: DR SARAH CARTER

Copy to:

DR SARAH CARTER PATIENT COPY:

Name of Test:

PARATHYROID HORMONE

Requested: 22/08/2024 Collected: 28/08/2024 Reported: 29/08/2024

01:14

CLINICAL NOTES: to follow

ENDOCRINOLOGY

PARATHYROID HORMONE

Req. No. PTH Units Ref. Range Date pmol/L (2.0 - 8.5) 28/08/24 22021329 6.2

SPECIMEN: SERUM

22021329 A normal or unsuppressed parathyroid hormone value suggests primary hyperparathyroidism in the presence of persistent hypercalcemia. Suggest urine calcium/creatinine ratio for further evaluation if clinically indicated.

+m

TESTS COMPLETED: BFO, AVB, FBE, IS, CA, ECU, LFT, PO4, OHD, PTH, INCOMPLETE TESTS: SEL,

LISA BRADLEY,

110 COSIMO DRIVE, WOODVALE. 6026

Phone: 0439034491

Birthdate: 11/06/1971

Sex: F Medicare Number: 62813253821

Laboratory: AUSTRALIAN CLINICAL LABS

Your Reference: 00001598 Lab Reference: 24-22021329-TMS-0

Addressee: DR SARAH CARTER

Referred by: DR SARAH CARTER

Copy to:

DR SARAH CARTER PATIENT COPY:

Name of Test: TRACE METALS SERUM/PLASMA

Requested: 22/08/2024 Collected: 28/08/2024 Reported: 30/08/2024

13:08

CLINICAL NOTES: to follow

TOXICOLOGY

TRACE METALS

SPECIMEN: SERUM/PLASMA

28/08/24

Coll. Time: 08:25 Lab Number: 22021329

Selenium

1.9

(0.6 - 1.9) umol/L

TESTS COMPLETED: BFO, AVB, FBE, IS, CA, ECU, LFT, PO4, OHD, PTH, SEL,

Result Date: 28/05/2024 16:10 CLINICAL NOTES: chest pain

BIOCHEMISTRY

LIPID STUDIES

SPECIMEN: SERUM

Date: Coll. Time: Lab Number:	28/05/24 16:10 90358258	09:40	31/01/23 13:30 74723403	Desirable Range (Fasting)
Fasting Status Total Chol. HDL Chol. LDL Chol. Non-HDL Chol.	Not State *** 12.8 1.7 *** 9.7 * 11.1	*** 18.4 1.9 *** 15.7	*** 11.6 1.5 *** 9.0	(< 5.6) mmol/L (> 1.1) mmol/L (< 3.1) mmol/L (< 4.1) mmol/L
Triglyceride	* 3.1	1.8	* 2.4	(< 2.1) mmol/L
LDL/HDL Ratio Chol/HDL Ratio	5.7 7.5	. <u>100 - 100</u>	The second secon	

90358258 Mild hypertriglyceridaemia. Familial hypercholesterolaemia (an autosomal co-dominant condition associated with elevated cholesterol and premature CVD) is a very important consideration with an LDL-c above 6.4 mmol/L. Secondary causes include hypothyroidism, cholestasis, steroids, and nephrotic syndrome. Suggest review for clinical stigmata of FH (eg tendon xanthomata) and review family history and calculate the FH likelihood (http://www.athero.org.au/fh/calculator), and for a list of FH specialists. Recommend specialist review and consideration of genetic testing. Elevated triglycerides may be secondary to poor diet, alcohol, diabetes or hypothyroidism.

Please note, from 27/09/2023, modified lipid reference ranges apply.

```
Recommended targets for high risk patients are Total cholesterol $<4.0\ mmol/L$ HDL Cholesterol $>1.0\ mmol/L$ LDL Cholesterol $<2.5\ mmol/L$ ( $<1.8\ mmol/L$ for very high risk) Non-HDL Cholesterol $<3.3\ mmol/L$ ( $<2.5\ mmol/L$ for very high risk) Fasting triglycerides $<2.0\ mmol/L$
```

Lipid ranges and targets are from the AACB Guideline for Harmonised Lipid Reporting (2018)

Target values need to be individualised based on clinical assessment of overall risk.

See the AusCVD Risk calculator at www.cvdcheck.org.au

Validated by Dr. D. Deam

AVB-R CRP-R GLS-R TIH-R BFO-R CK-R ESR-R FBE-R IS-R LIP-C CA

All tests on this request have now been completed Panel Free Text:

Lipid Comment:

Mild hypertriglyceridaemia. Familial hypercholesterolaemia (an autosomal co-dominant condition associated with elevated cholesterol and premature CVD) is a very important consideration with an LDL-c above 6.4 mmol/L. Secondary causes include hypothyroidism, cholestasis, steroids, and nephrotic syndrome. Suggest review for clinical stigmata of FH (eg tendon xanthomata) and review family history and calculate the FH likelihood (http://www.athero.org.au/fh/calculator), and for a list of FH specialists. Recommend specialist review and consideration of genetic testing. Elevated triglycerides may be secondary to poor diet, alcohol, diabetes or hypothyroidism.

Ref Range:

Desirable Range (Fasting) HIGH RISK LDL REF RANGE:

Recommended targets for high risk patients are

Total cholesterol < 4.0 mmol/L HDL Cholesterol > 1.0 mmol/L

LDL Cholesterol < 2.5 mmol/L (< 1.8 mmol/L for very high risk) Non-HDL

Cholesterol < 3.3 mmol/L (< 2.5 mmol/L for very high risk) Fasting triglycerides <

2.0 mmol/L

Lipid ranges and targets are from the AACB Guideline for Harmonised Lipid Reporting (2018)

Target values need to be individualised based on clinical assessment of overall risk. See the AusCVD Risk calculator at www.cvdcheck.org.au
COMMENT:

Please note, from 27/09/2023, modified lipid reference ranges apply.

Ordered by: SARAH CARTER Collected Date: 28-May-2024 Reported Date: 29-May-2024 Result Date: 06/06/2024 09:17

CLINICAL NOTES: 2 weekly monitoring

SPECIMEN: SERUM BIOCHEMISTRY - THYROID AUTOANTIBODIES - CUMULATIVE

Date	Date Lab Number		TGII U/ml) 4.5)	aTPO (U/ml) (< 60)		
06/06/24	90358087		4.4	*	72	
06/06/24		*	4.6	*	79	

Key:

aTGII - anti-thyroglobulin antibodies aTPO - anti-thyroid peroxidase antibodies

Anti-ThyroGlobulin assay (aTGII) is standardised to the WHO International Reference Preparation, Human (NIBSC 65/093) and is performed on the Siemens Centaur/Atellica Immunoassay systems.

Elevated thyroid peroxidase antibody level. This may be associated with auto-immune thyroid disease. TSH receptor antibodies to follow.

THA-C TSI-V TSR-W TFT-R FT4-R

This request has other tests in progress at the time of reporting 72 U/mL (< 60) HThyroid peroxidase antibody: Comment:

Elevated thyroid peroxidase antibody level. This may be associated with auto-immune thyroid disease. TSH receptor antibodies to follow.

Thyroglobulin antibodies:

4.4 IU/mL (< 4.5)

COMMENT:

Key:

aTGII - anti-thyroglobulin antibodies aTPO - anti-thyroid peroxidase antibodies

Anti-ThyroGlobulin assay (aTGII) is standardised to the WHO International Reference Preparation, Human (NIBSC 65/093) and is performed on the Siemens Centaur/Atellica Immunoassay systems.

Copy to: IMRAN BADSHAH Copy to: IMRAN BADSHAH Ordered by: SARAH CARTER Collected Date: 06-Jun-2024

Result Date: 06/06/2024 09:17

CLINICAL NOTES: 2 weekly monitoring

SPECIMEN: SERUM IMMUNOLOGY

TSH RECEPTOR ANTIBODIES

Date Lab No. TSH Receptor Antibodies

_____ 06/06/24 90358087 1.1 (< 1.8) IU/L

The following results on this sample have been reported in detail, and are reproduced here in abbreviated form for your convenience.

Thyroid peroxidase ab. titre 72 (0-59)Free Thyroxine (FT4) 24.3 pmol/L (9.00-20.00)Thyroid Stimulating Hormone 5.96 mIU/L (0.40-4.00)

As of the 18/11/19 a new anti-TSH Receptor Antibody is in use. This assay has an increased tolerance to Biotin interference.

THA-R TSI-V TSR-C TFT-R FT4-R

This request has other tests in progress at the time of reporting

TSH Receptor antibodies: 1.1 IU/L (< 1.8)
Thyroid peroxidase ab. titre: 72 (0 - 59)
FT4: 24.3 pmol/L (9.00 - 20.00)
TSH: 5.96 mIU/L (0.40 - 4.00)

ASSAY COMMENT:

As of the 18/11/19 a new anti-TSH Receptor Antibody is in use. This assay has an increased tolerance to Biotin interference.

Copy to: IMRAN BADSHAH Copy to: IMRAN BADSHAH Ordered by: SARAH CARTER Collected Date: 06-Jun-2024 Reported Date: 07-Jun-2024

Result Date: 06/06/2024 09:17

CLINICAL NOTES: 2 weekly monitoring

BIOCHEMISTRY

THYROID STIMULATING IMMUNOGLOBULINS (TSI)

SPECIMEN: SERUM

Thyroid Stimulating TSH Receptor
Date Lab Number Immunoglobulins (TSI) Antibody IU/L (< 1.8)

IU/L (< 0.55)

06/06/24 90358087

0.19

1.1

COMMENT: The manufacturer of the TSI assay, currently in use at ACL, reports clinical sensitivity and specificity for untreated Graves disease, of 98.3% and 99.7% respectively, while for TRAb the reported sensitivity is 96 % and the specificity is 99 %.

THA-R TSI-C TSR-R TFT-R FT4-R

All tests on this request have now been completed

TSH Immunoglobulins (TSI): 0.19 IU/L (< 0.55) TSH Receptor antibodies: 1.1 IU/L (< 1.8)

COMMENT:

The manufacturer of the TSI assay, currently in use at ACL, reports clinical sensitivity and specificity for untreated Graves disease, of 98.3% and 99.7% respectively, while for TRAb the reported sensitivity is 96 % and the specificity is 99 양.

Copy to: IMRAN BADSHAH Copy to: IMRAN BADSHAH Ordered by: SARAH CARTER Collected Date: 06-Jun-2024 Reported Date: 10-Jun-2024

110 COSIMO DRIVE, WOODVALE. 6026

Phone: 0439034491 Birthdate: 11/06/1971 Sex: F 62813253821 Medicare Number:

Your Reference: SCANNED Lab Reference: 24-21994895-TMA-0

Laboratory: AUSTRALIAN CLINICAL LABS

Addressee: DR SARAH CARTER Referred by: DR SARAH CARTER

Copy to:

DR SARAH CARTER DR IMRAN BADSHAH DR IMRAN BADSHAH

Name of Test:

TFT MASTER PANEL

Requested: 29/04/2024 Collected: 12/08/2024

Reported: 12/08/2024 16:35

SPECIMEN: SERUM

CLINICAL NOTES: 2 weekly monitoring

ENDOCRINOLOGY

THYROID FUNCTION TEST

06/06/24 06/06/24 12/08/24 Date: 09:17 09:17 Coll. Time: 08:13 21994895 90358087 90358088 Lab Number: _____ 25.8 (9.0 - 25.0) pmol/L 24.3 * 19.7 * Free T4 (0.40 - 4.00)mIU/L (3.5 - 6.5) pmol/L 2.44 * 5.96 * 6.53 Free T3 5.1

21994895 History of hypothyroidism and positive thyroid antibodies. Euthyroid levels.

Please note an updated reference range for FT4 since 26/06/2024.

TESTS COMPLETED: FT4, TFT,

110 COSIMO DRIVE, WOODVALE. 6026

Phone: 0439034491 Birthdate: 11/06/1971 Sex: F Medicare Number: 62813253821 Your Reference: 00001598 Lab Reference: 24-22021329-TF-0

Laboratory: AUSTRALIAN CLINICAL LABS

Addressee: DR SARAH CARTER Referred by: DR SARAH CARTER

Copy to:

DR SARAH CARTER PATIENT COPY:

Name of Test:

TO FOLLOW PANEL

Requested: 22/08/2024 Collected: 28/08/2024 Reported: 28/08/2024 11:01

CLINICAL NOTES: to follow

SPECIMEN RECEPTION

Specimens to follow:

REF: REFERRED TEST

Outstanding

We are currently awaiting receipt of a suitable specimen to complete the above tests.

INCOMPLETE TESTS: BFO, AVB, FBE, IS, CA, ECU, LFT, PO4, OHD, PTH, SEL,

110 COSIMO DRIVE, WOODVALE. 6026

Phone: 0439034491 Birthdate: 11/06/1971 Birthdate: 11/06/1971 Sex: F Medicare Number: 62813253821
Your Reference: 00001598 Lab Reference: 24-22021329-HAE-0 Medicare Number: 62813253821

Laboratory: AUSTRALIAN CLINICAL LABS

Referred by: DR SARAH CARTER Addressee: DR SARAH CARTER

Copy to:

DR SARAH CARTER PATIENT COPY:

HAEMATOLOGY GENERAL Name of Test:

Requested: 22/08/2024 Collected: 28/08/2024 Reported: 28/08/2024 13:09

CLINICAL NOTES: to follow

SPECIMEN: WHOLE BLOOD HAEMATOLOGY

Date:	28/08/24	28/05/24	26/04/24	(#Refers to current result only)
Coll. Time:	08:25	16:10	09:40	
Lab Number:	#22021329	90358258	86189651	
HAEMOGLOBIN	140	132	4.44 (15 - 165) g/L
RBC	4.31	3.88		3.80 - 5.50)x10 12/L
HCT MCV	0.43	0.39 * 100		(0.35 - 0.47) (80 - 99) fL
MCH	32.5	34.0	A-0.000 A-0.00	(27.0 - 34.0)pg
MCHC	329	342		(310 - 360) g/L
RDW	11.4	14.1	14.0	(11.0 - 15.0)%
WCC Neutrophils	5.7 2.6	7.5 3.9	3.1	$(2.0 - 8.0) \times 10 9/L$
Lymphocytes	2.5	2.8		(1.0 - 4.0) x10 9/L
Monocytes	0.6	0.7		(< 1.1) x10 9/L
Eosinophils	< 0.1	< 0.1		(< 0.7) x10 9/L
Basophils	< 0.1	< 0.1		(< 0.3) x10 9/L
PLATELETS MPV	346 9.7	361 9.6		L50 - 450) x10 9/L (7.1 - 11.2) fL
ESR	5.7	17		(< 21) mm/h

#22021329 : The red cell, white cell and platelet parameters are within normal limits.

TESTS COMPLETED: FBE,

INCOMPLETE TESTS: BFO, AVB, IS, CA, ECU, LFT, PO4, OHD, PTH, SEL,

110 COSIMO DRIVE, WOODVALE. 6026

Phone: 0439034491 Birthdate: 11/06/1971 Sex: F Medicare Number: 62813253821 Your Reference: 00001598 Lab Reference: 24-22021329-OHD-0

Laboratory: AUSTRALIAN CLINICAL LABS

Addressee: DR SARAH CARTER Referred by: DR SARAH CARTER

Copy to:

DR SARAH CARTER PATIENT COPY:

Name of Test: VITAMIN D

Reported: 28/08/2024 14:58 Requested: 22/08/2024 Collected: 28/08/2024

CLINICAL NOTES: to follow

BIOCHEMISTRY

SPECIMEN: SERUM VITAMIN D

25-hydroxy Date Time Lab No. Vitamin D

28/08/24 08:25 22021329 ** 23 (50 - 200) nmol/L 31/01/23 13:30 74723403 * 34

22021329 Vitamin D remains low. Suggest review vitamin D dose and compliance if on treatment.

Interpretation:

Vitamin D deficiency <50 nmol/L Severe deficiency <20 nmol/L

COMMENT: Vitamin D sufficiency is defined as greater than or equal to 50 nmol/L at the end of winter (level may need to be 10-20 nmol/L higher at the end of summer).

Reference: Position Statement. Vitamin D and Health in Adults in Australia and New Zealand. MJA, 196(11): 686-687, 2012.

TESTS COMPLETED: FBE, IS, OHD, INCOMPLETE TESTS: BFO, AVB, CA, ECU, LFT, PO4, PTH, SEL,

110 COSIMO DRIVE, WOODVALE. 6026

Phone: 0439034491 Birthdate: 11/06/1971 Birthdate: 11/06/1971 Sex: F Medicare Number: 62813253821
Your Reference: 00001598 Lab Reference: 24-22021329-ISM-0

Laboratory: AUSTRALIAN CLINICAL LABS

Addressee: DR SARAH CARTER Referred by: DR SARAH CARTER

Copy to:

DR SARAH CARTER PATIENT COPY:

Name of Test:

IRON MASTER

Requested: 22/08/2024 Collected: 28/08/2024 Reported: 28/08/2024 14:58

CLINICAL NOTES: to follow

BIOCHEMISTRY

IRON STUDIES SPECIMEN: SERUM

Date:	28/08/24	28/05/24	26/04/24		
Coll. Time:	08:25	16:10	09:40		
Lab Number:	22021329	90358258	86189651		
Iron	16.3	18.3		(10.0 - 30.0)	umol/L
Transferrin	2.81	3.03		(2.10 - 3.80)	g/L
Saturation	23	24		(15 - 45)	90
Ferritin	155	141	171	(30 - 300)	ug/L

22021329 Iron studies are within normal limits.

TESTS COMPLETED: FBE, IS, OHD, INCOMPLETE TESTS: BFO, AVB, CA, ECU, LFT, PO4, PTH, SEL,

110 COSIMO DRIVE, WOODVALE. 6026

Phone: 0439034491 Birthdate: 11/06/1971 Birthdate: 11/06/1971 Sex: F Medicare Number: 62813253821 Your Reference: 00001598 Lab Reference: 24-22021329-BFM-0

Laboratory: AUSTRALIAN CLINICAL LABS

Addressee: DR SARAH CARTER Referred by: DR SARAH CARTER

Copy to:

DR SARAH CARTER PATIENT COPY:

Name of Test: B12, FOLATE (SERUM/RBC)

Requested: 22/08/2024 Collected: 28/08/2024 Reported: 28/08/2024 15:14

CLINICAL NOTES: to follow

BIOCHEMISTRY

VITAMIN B12 AND FOLATE SPECIMEN: SERUM/BLOOD

Date: Time: Lab Number:	28/08/24 08:25 22021329	28/05/24 16:10 90358258		26/04/24 09:40 86189651			
Vitamin B12 Active B12 Folate	240 > 146 41.1	211 80 28.7	*	173 83 35.2	(>	30)	pmol/L pmol/L nmol/L

22021329 Normal B12 and folate results.

RANGES	B12		Serum Folate
Normal	>	180	> 10.0
Equivocal	150 -	180	5.0 - 10.0
Deficient	<	150	< 5.0

TESTS COMPLETED: BFO, AVB, FBE, IS, OHD, INCOMPLETE TESTS: CA, ECU, LFT, PO4, PTH, SEL,

110 COSIMO DRIVE, WOODVALE. 6026

Phone: 0439034491 Birthdate: 11/06/1971 Sex: F Medicare Number: 62813253821 Your Reference: 00001598 Lab Reference: 24-22021329-MBI-0

Laboratory: AUSTRALIAN CLINICAL LABS

Addressee: DR SARAH CARTER Referred by: DR SARAH CARTER

Copy to:

DR SARAH CARTER PATIENT COPY:

Name of Test: MULTIPLE BIOCHEM ANALYSIS

Requested: 22/08/2024 Collected: 28/08/2024 Reported: 28/08/2024 16:49

SPECIMEN: SERUM

CLINICAL NOTES: to follow

GENERAL CHEMISTRY

Date: Coll. Time: Lab Number:	08	/08/24 3:25 2021329		28/05/24 16:10 90358258		26/04/24 09:40 86189651		
Sodium Potassium Chloride Bicarbonate Anion Gap Urea Creatinine eGFR Calcium Adj. Ca. Magnesium Phosphate T.Protein Albumin Globulin ALP	*	137 4.4 105 28 8 6.8 77 76 2.77 2.71 1.11 75 44 31 72	*	136 4.8 103 23 15 9.2 71 84 2.66 2.58 0.84 1.06 77 45 32 83	*	137 4.4 102 28 11 7.3 96 58 0.85	(135 - 145) (3.5 - 5.2) (95 - 110) (22 - 32) (9 - 19) (3.5 - 8.0) (45 - 90) (> 59) mL/min (2.10 - 2.60) (2.10 - 2.60) (0.70 - 1.10) (0.75 - 1.50) (60 - 80) (35 - 50) (33 - 39) (30 - 110)	mmol/L mmol/L mmol/L mmol/L mmol/L mmol/L umol/L /1.73m2 mmol/L mmol/L mmol/L mmol/L g/L g/L g/L g/L U/L
Bilirubin GGT		11 30		8 29		11 34	(3 - 20) (5 - 35)	umol/L U/L
AST	*	32	*	34	*	85	(5 - 30)	U/L
ALT		31		29	*	47	(5 - 35)	U/L
LD				191			(120 - 250)	U/L

22021329 ELECTROLYTES

Elevated calcium. PTH and serum 25 hydroxy vitamin D to follow. LIVER FUNCTION

An elevation of AST with a normal ALT may be of muscle or cellular origin. Consider repeat with CK and LDH if clinically indicated.

tm

TESTS COMPLETED: BFO, AVB, FBE, IS, CA, ECU, LFT, PO4, OHD, INCOMPLETE TESTS: PTH, SEL,

110 COSIMO DRIVE, WOODVALE. 6026

Phone: 0439034491 Birthdate: 11/06/1971 Birthdate: 11/06/1971 Sex: F Medicare Number: 62813253821
Your Reference: 00001598 Lab Reference: 24-22021329-PTH-0 62813253821

Laboratory: AUSTRALIAN CLINICAL LABS

Addressee: DR SARAH CARTER Referred by: DR SARAH CARTER

Copy to:

DR SARAH CARTER PATIENT COPY:

Name of Test: PARATHYROID HORMONE

Requested: 22/08/2024 Collected: 28/08/2024 Reported: 29/08/2024 01:14

CLINICAL NOTES: to follow

ENDOCRINOLOGY

PARATHYROID HORMONE

SPECIMEN: SERUM

Date	Req. No.	PTH	Units	Ref. Range
28/08/24	22021329	6.2	pmol/L	(2.0 - 8.5)

22021329 A normal or unsuppressed parathyroid hormone value suggests primary hyperparathyroidism in the presence of persistent hypercalcemia. Suggest urine calcium/creatinine ratio for further evaluation if clinically indicated.

tm

TESTS COMPLETED: BFO, AVB, FBE, IS, CA, ECU, LFT, PO4, OHD, PTH, INCOMPLETE TESTS: SEL,

110 COSIMO DRIVE, WOODVALE. 6026

Phone: 0439034491 Birthdate: 11/06/1971 Birthdate: 11/06/1971 Sex: F Medicare Number: 62813253821
Your Reference: 00001598 Lab Reference: 24-22021329-TMS-0

Laboratory: AUSTRALIAN CLINICAL LABS

Addressee: DR SARAH CARTER Referred by: DR SARAH CARTER

Copy to:

DR SARAH CARTER PATIENT COPY:

Name of Test: TRACE METALS SERUM/PLASMA

Requested: 22/08/2024 Collected: 28/08/2024 Reported: 30/08/2024 13:08

CLINICAL NOTES: to follow

TOXICOLOGY

TRACE METALS

SPECIMEN: SERUM/PLASMA

28/08/24 Coll. Time: 08:25

Lab Number: 22021329 ______

Selenium

1.9

(0.6 - 1.9) umol/L

TESTS COMPLETED: BFO, AVB, FBE, IS, CA, ECU, LFT, PO4, OHD, PTH, SEL,